# Case 25-15790-SLM Doc 18 Filed 07/15/25 Entered 07/15/25 12:20:58 Desc Main Document Page 1 of 8

Fill in this information to identify	your case:					
Peter J. DeLuca	Ш					
First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Mrddle Name	Last Name				
United States Bankruptcy Court for the:	District of New Jersey					
Case number 25-15790				Check if th		
(II KIIOWII)					ended filing	
					lement showing postpetition as of the following date:	n chapter 13
Official Form 106l				7	D / YYYY	
Schedule I: You	rIncome					12/15
Be as complete and accurate as posupplying correct information. If you figure separated and your spouseparate sheet to this form. On the Part 1: Describe Employment	ou are married and not fi ise is not filing with you, top of any additional pa	lling jointly, and yo , do not include inf	ur spou ormatio	se is living with y n about your spou	ou, include information abou use. If more space is needed	ut your spouse. I, attach a
1. Fill in your employment		Dahtan 4			Dahtar 2 ar non filing o	
information.		Debtor 1			Debtor 2 or non-filing sp	Jouse
If you have more than one job, attach a separate page with	Employment status	Employed			☐ Employed	
information about additional employers.		☐ Not employ	ed		Not employed	
Include part-time, seasonal, or self-employed work.						
Occupation may include student	Occupation	Carpenter				
or homemaker, if it applies.		Carpenters	Union	Local 253		
	Employer's name	3 <del></del>				
	Employer's address	91 Fieldcre	st Ave		20	
		Number Street Suite A22			Number Street	
		: <u>-</u>				
		Edison, NJ	 08837		<del></del>	
		City	State	ZIP Code	City State	ZIP Code
	How long employed th	ere? 1 Day				
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of	the date you file this for	m. If you have noth	ing to re	port for any line, wr	ite \$0 in the space. Include yo	ur non-filing
spouse unless you are separated  If you or your non-filing spouse ha	ave more than one employ	ver, combine the info				
below. If you need more space, a	ttach a separate sheet to t	this form.			5 B	
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, saldeductions), If not paid monthly,			2.	\$ 5,824.00	\$0.00	
3. Estimate and list monthly over	time pay.		3. +	\$0.00	+ \$ 0.00	
4. Calculate gross income. Add li	ne 2 + line 3		4.	\$ 5,824.00	\$0.00	

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Desc Main ....

Debtor 1

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For Debtor 1 For Debtor 2 or non-filing spouse 0.00 5,824.00 Copy line 4 here..... 5. List all payroll deductions: 2,399.11 0.00 5a. Tax, Medicare, and Social Security deductions 5a 0.00 0.00 5b. Mandatory contributions for retirement plans 5b 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 550.33 0.00 5e. 5e. Insurance 0.00 0.00 5f. Domestic support obligations 5f. 32.50 0.00 5g. Union dues 5g 0.00 0.00 5h. Other deductions. Specify: 5h. 0.00 2,981.94 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5q + 5h. 0.00 2.842.06 7. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 0.00 monthly net income. 8a 0.00 0.00 8b 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 0.00 0.00 Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. Unemployment compensation 8d. 0.00 8e. Social Security 0.008e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 0.00 8f. Specify: 0.00 0.00 8g. Pension or retirement income 8g. 0.00 0.00 8h: Other monthly income. Specify: 8h. +\$ 0.00 0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. 2.842.06 2,842.06 0.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 1.400.00 Contribution of Camila F. Rodriguez - - Debtor's Daughter In Law 11. **+** 12 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 4,242.06 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined

13. Do you expect an increase or decrease within the year after you file this form?

Debtor received Unemployment: July 05, 2025 in the net amount of \$787 and July 09, 2025 in the amount of \$1,574.00. Debtor began new Employment as of July 14, 2025 He will be paid on the weekly basis, earning approx. \$47,00 per hour.

monthly income

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	•		
Fill in this information to identify your case:			
Debtor 1 Peter J. DeLuca III	Check if this is:		
First Name Middle Name Last Name  Debtor 2		CI.	
(Spouse, if filing) First Name Middle Name Last Name	An amended		petition chapter 13
United States Bankruptcy Court for the: District of New Jersey		of the following	
Case number (If known) 25-15790	MM / DD / YYY	Y	
(I KIOWI)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filinformation. If more space is needed, attach another sheet to this form (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No  Yes. Debtor 2 must file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents names.			No Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a expenses as of a date after the bankruptcy is filed. If this is a supplemapplicable date.  Include expenses paid for with non-cash government assistance if you	ental <i>Schedule J</i> , check the box at th		
such assistance and have included it on Schedule I: Your Income (Offi		Your expe	nses
4. The rental or home ownership expenses for your residence. Include any rent for the ground or lot.	first mortgage payments and 4,	\$	2,355.34
If not included in line 4:			0.00
4a. Real estate taxes	4a.	\$	
4b. Property, homeowner's, or renter's insurance	4b.	\$	0.00
4c. Home maintenance, repair, and upkeep expenses	4c.	\$	0.00
4d. Homeowner's association or condominium dues	4d.	\$	0.00

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Debtor 1

Peter J. DeLuca III

First Name Middle Name Last Name

Case number (if known) 25-15790

			Your ex	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	235.00
	6b. Water, sewer, garbage collection	6b.	\$	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9	Clothing, laundry, and dry cleaning	9.	\$	0.00
10.	Personal care products and services	10.	\$	40.00
11.	Medical and dental expenses	11,	\$	75.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.	15)	*	
13.	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	335.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16,	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a_	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		
	20a. Mortgages on other property	20a.	S	0.00
	20b, Real estate taxes	20b	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	
	20e. Homeowner's association or condominium dues	20e	\$	0.00

#### Document Page 5 of 8 25-15790 Peter J. DeLuca III Case number (if known) Debtor 1 First Name Middle Name Other. Specify:\_ 0.00 21. +\$ Calculate your monthly expenses. 3,820.34 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a 22b. 3,820.34 22c. and 22b. The result is your monthly expenses. 23. Calculate your monthly net income. 4,242.06 23a. 23a. Copy line 12 (your combined monthly income) from Schedule I. 3,820.34 Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. 421.72 The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. ☐ Yes. Explain here:

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Fill in this in	irormation to identity y	our case:	
Debtor 1	Peter J. DeLuca III	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States F	Bankruptcy Court for the Di	strict of New Jerse	÷У
Case number (If known)	25-15790		
(			

### Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did you	ı pay or agree to pay someone who is NOT an at	torney to help you fill out bankruptcy forms?
☑ No		
☐ Yes	. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119),
	penalty of perjury, I declare that I have read the sey are true and correct.	ummary and schedules filed with this declaration and
<b>X</b> Signatu	Reten of Deduca x	Signature of Debtor 2
-	07/15/2025	Date

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	Peter J. DeLuca III			
st Name	Middle Name	Last Name		
st Name	Middle Name	Last Name	-	
	t Name	t Name Middle Name		

Check if this is an amended filing

#### Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Schedule A/B: Property (Official Form 106A/B)	Your assets Value of what you own
1a. Copy line 55, Total real estate, from Schedule A/B	\$ 325,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>17,512.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$342,512.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	- 245 575 50
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$4,931.00
Your total liabilities	\$250,506.59
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>4,</u> 242.06
Schedule J: Your Expenses (Official Form 106J)	§ 3,820.34

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Peter DeLuca III

Debtor 1

Middle Name First Name Last Name

25-15790 Case number (if known)

Pa	art 4: Answer These Questions for Administrative and Statistical Records						
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form, Check this box and submit this form to the court with your other schedules.  Yes						
7.	<ul> <li>7. What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul>						
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.						
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim					
	From Part 4 on Schedule E/F, copy the following:						
	9a. Domestic support obligations (Copy line 6a.)	\$					
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s0.00 0.00					
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$					
	9d. Student loans. (Copy line 6f.)	\$					
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$					
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$					
	9g. <b>Total.</b> Add lines 9a through 9f.	\$0.00					